



Commercial Soliciting Permit Application

APPLICATION DATE: _____ Rcvd by: _____ (City Employee Initials)

Check One: Fixed Location _____ Door-to-Door _____

1. The applicant must submit this application with all the required documentation as follows:

PLEASE NOTE: Titleholder is the Property Owner / Manager and Applicant is the Responsible Person requesting the permit (in the case of a door-to-door solicitor, the applicant must be the actual person going door-to-door)

- Completed application (attached)
- Notarized** S.A.V.E. Affidavit by applicant (attached)
- Notarized** E-verify Affidavit by applicant (attached-complete one or the other)
- If at a fixed location, **Notarized** signature of titleholder of property (attached)
- Notarized** criminal consent form from the applicant (attached)
- A copy of the applicant's current driver's license
- If at a fixed location, plat or drawing of the property showing the set up of the sale, approved by the Paulding County Fire Marshal-770-222-1160. For events on the Corridor Overlay, please request a copy of the Corridor Overlay Ordinance to make sure you are in compliance with the requirements
- A copy of a valid occupation tax certificate issued to the business by a jurisdiction in Georgia; if the business does not have one, we will collect an occupation tax from the business-this requires additional documents
- If a door-to-door applicant, 2, 2x2 photos of applicant (passport-size photos)
- \$1000 surety bond (See City of Hiram Code of Ordinances 12-305 (b) for details)
- Proof of liability insurance, including \$500,000 combined limit product liability and property damage (See City of Hiram 12-305(c) for details)
- A copy of the peddler's/itinerant merchant's Probate Court license; contact them at 770-443-7541
- Check, money order or cash in the amount of \$50.00 for the application fee. This is a non-refundable fee

****If upon review by staff, the application is incomplete, missing required documentation, missing payment, or unclear, it will not be processed until all information is provided*****

2. Each business/sale/activity/sole proprietor must be permitted separately.

3. Certain situations may require additional permitting:

Tents & Firework Sales may require permitting from the Paulding County Fire Department-770-222-1160

Signs may require permitting from the City of Hiram-770-943-3726, ext. 218

Construction may require permitting from the Paulding Building Department-770-443-7571

Food Service businesses may require permitting from the Environmental Health Division-770-443-7877

- All activity related to the solicitation shall occur only between the hours of 9:00am and 8:00pm, Eastern Time.
- No business transaction and/or solicitation shall occur within 35 feet of any street, alley, road or highway.
- Door-to-door applicants: it is unlawful to visit any residence where there is posted a "NO SOLICITORS" sign; it is unlawful to not leave the premises of any person when requested to do so
- IT IS THE APPLICANT'S RESPONSIBILITY TO BE KNOWLEDGEABLE OF ALL FEDERAL, STATE AND LOCAL REGULATIONS FOR THE ACTIVITY REQUESTED.
- If issued, the permit is good for a 14-day period. An applicant may only be issued one permit in a 6-month period. To obtain another permit after that time, the applicant must submit all required documents and fees. YOUR PREVIOUS APPLICATION WILL NOT BE USED FOR RENEWAL OR SERVE AS AUTOMATIC RENEWAL.
- For door-to-door applicants, this application and permit will only apply to the named applicant; if at a fixed location, this application and permit may only apply to one location; under no circumstances are any permits transferable.
- The permit can be revoked.
- Permits issued must be posted in a visible location on site or on your person if going door-to-door.
- A viable permit is signed by the Chief of Police and is sealed with the City of Hiram Seal. Photocopies cannot be used in lieu of an original permit.

THE CITY OF HIRAM REQUIRES A MINIMUM OF 10 BUSINESS DAYS IN ORDER TO REVIEW, VERIFY DOCUMENTATION AND ISSUE YOUR PERMIT. NO EXCEPTIONS. YOU WILL BE CALLED WHEN YOUR PERMIT IS READY FOR PICKUP.

By signing this page you understand the requirements and agree to abide by all current ordinances and regulations regarding your permit to be issued. Failure to comply will result in immediate revocation of permit.

APPLICANT SIGNATURE _____

DATE _____

MC 6-13-13

PLEASE PRINT ALL INFORMATION:

APPLICANT MUST COMPLETE PERSONAL/BUSINESS INFORMATION:

Person Completing Application/Responsible Party: _____

Address: _____ City: _____ State: _____ Zip: _____

Responsible Person Contact Phone: _____

Business Name: _____ Business Address: _____

Business Phone: _____

Email Address: _____ Fax Number: _____

Current Business License Number and Issuing Jurisdiction: _____

Location of Property Where Sale is to be Conducted: _____

Address / Nearest intersection or cross streets / Name of shopping center / Neighborhood

Parcel ID No. for property: _____ (you must provide this number in order for permit to be considered)

Description of nature of business and goods to be sold: _____

REQUESTED START DATE: _____ END DATE: _____

If a vehicle is to be used: Make: _____ Model: _____ Year: _____ Color: _____ Tag Number: _____

VIN: _____

Has the applicant ever been convicted of any crime, misdemeanor, or violation of any municipal ordinance involving theft, deception or injury to persons? Y / N If yes, please provide the nature of the offense and the punishment/penalty assessed.

Signature of Applicant: _____ Date: _____

Printed Name of Applicant: _____

SUBSCRIBED AND SWORN BEFORE ME ON THIS, THE _____ DAY OF _____ IN THE YEAR _____.

Notary Public Signature

My Commission Expires

Seal

TITLEHOLDER MUST COMPLETE INFORMATION: (if at a fixed location)

Name of Property Titleholder Company: _____

Contact person at titleholder company: _____

Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Titleholder contact phone: _____

Signature must be Notarized Below / Application not accepted without notary signature

I, as titleholder/representative/approved agent, hereby grant permission for the above-referenced activity on my property and understand that the applicant may only be issued one permit in 6 months, for a maximum of 14 days per permit.

Titleholder Signature: _____

SUBSCRIBED AND SWORN BEFORE ME ON THIS, THE _____ DAY OF _____ IN THE YEAR _____.

Notary Public Signature

My Commission Expires

Seal

Consent to G.C.I.C. Search of Records

1. Applicant's Name: _____
Last First Middle

2. Address: _____
Street No. & Name City State Zip

3. Social Security Number: _____ - _____ - _____

4. Date of Birth: _____ / _____ / _____
Month Day Year

5. Driver's License State & Number: _____

6. Sex _____ Male _____ Female

7. Race: _____

The undersigned does further consent and authorize the City of Hiram Police Department or any other Federal, State or Local agency to conduct an investigation on the criminal history record of criminal history pertaining to the undersigned which may be found in the files of any Federal, State or Local Criminal Justice Agency as maintained by the Georgia Bureau of Investigation's Georgia Crime Information Center or similar agency.

This _____ day of _____, 20____.

Applicant Signature

Sworn and subscribed before me this _____ day of _____, 20____.

Notary Public Signature and Seal

CITY OF HIRAM

S.A.V.E. Affidavit Verifying Status for Business Transactions with City of Hiram

By executing this affidavit under oath, as an applicant for a City of Hiram *Commercial Soliciting Permit*,

I am stating the following with respect to my application to The City of Hiram for the license, permit or other public benefit as indicated above.

_____ [Applicant's Name]

_____ [Name of Business]

[check the blank that applies below]

1) _____ I am a **United States citizen** 18 years of age or older and have provided at least one secure and verifiable document, as required by O.C.G.A § 50-36-1(e)(1), with this affidavit, which can best be described as:

OR

2) _____ I am a **legal permanent resident** 18 years of age or older or I am an otherwise qualified alien or nonimmigrant under the Federal Immigration and Nationality Act 18 years of age or older and lawfully present in the United States.* All persons that check this box must be verified through DHS's SAVE program. (Must include a copy of your current State Driver's License and either a copy of your Permanent Resident Card or Employment Authorization Card)

In making the above statement under oath, I understand that any person who knowingly and willfully makes a false, fictitious, or fraudulent statement or representation in an affidavit shall be guilty of a violation of O.C.G.A. Section 16-10-20.

Signature of Applicant

Date

NOTARIZATION REQUIRED:

SUBSCRIBED AND SWORN BEFORE ME ON
THIS THE ____ DAY OF ____, 20__.

Printed Name

Notary Public

*Alien Registration number for non-citizens

My Commission Expires: _____

***Note:** O.C.G.A. § 50-36-1(3)(2) requires that aliens under the Federal Immigration and Nationality Act, Title 8 U.S.C., as amended, provide their alien registration number. Because legal permanent residents are included in the federal definition of "alien", legal permanent residents must also provide their alien registration number. Qualified aliens that do not have an alien registration number may supply another identifying number below:

Alternate Identifying number for qualified aliens who do not have an A.R. number

Return to: City of Hiram, 217 Main Street, Hiram, GA 30141

Please supply an E-mail address which the City may use for any future correspondence to your firm or to request this form in subsequent years:

E-mail _____

City of Hiram

to be completed by businesses with 11 or more employees and those who have an E-verify number

Private Employer Affidavit of Compliance Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies its compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm or corporation **has registered with and utilizes** the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6.

Furthermore, the undersigned private employer hereby attests that its federal work authorization user identification number and date of authorization are as follows:

Federal Work Authorization User Identification Number

Date of Authorization

Name of Private Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, __, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:

City of Hiram

to be completed by businesses with 10 or fewer employees and don't have an E-verify number

PLEASE SIGN IN BOTH PLACES

Private Employer Exemption Affidavit Pursuant To O.C.G.A. § 36-60-6(d)

By executing this affidavit, the undersigned private employer verifies that it is exempt from compliance with O.C.G.A. § 36-60-6, stating affirmatively that the individual, firm, or corporation **employs ten (10) or fewer employees** and is not required to register with and/or utilize the federal work authorization program commonly known as E-Verify, or any subsequent replacement program, in accordance with the applicable provisions and deadlines established in O.C.G.A. § 36-60-6.

Signature of Exempt Private Employer

Printed Name of Exempt Private Employer

I hereby declare under penalty of perjury that the foregoing is true and correct.

Executed on _____, 201__ in _____ (city), _____ (state).

Signature of Authorized Officer or Agent

Printed Name and Title of Authorized Officer or Agent

SUBSCRIBED AND SWORN BEFORE ME

ON THIS THE _____ DAY OF _____, 201__.

NOTARY PUBLIC

My Commission Expires:
